HAZARD/DEFICIENCY INSPECTION RECORD

SUSPENSE DATE

For use of this form, see AR 420-90, the proponent agency is USACE

TO:		FROM: (Fire Chief)	
LOCATION OF FIRE SAFETY V	IOLATION	DATE AND TIME OF VIOLATION	
HAZARDS	S/DEFICIENCIES NOTED	CORRECTIVE ACTION TAKEN (Return to Fire Chief)	
DATE	REPORT DONE BY:		
DATE	INSTALLATION FIRE CHIEF SIGNATURE:		
DATE	INSTALLATION FIRE MARSHALL SIGNATURE:		
DATE	ORGANIZATION OR ACTIVITY FIRE MARSHALL SIGNATURE:		
FOLLOW UP INSPECTION	☐ SATISFACTORY ☐ UNSATISFACTORY		
DATE	INCRECTED BY.		
DATE INSPECTED BY:			